

PEST CONTROL



THE PESTEX COMPANY

A division of Advance Group, LLC

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SERVICE ACKNOWLEDGEMENT REPORT

 SERVICE
TICKET NO.: **02955**

Name/Company: DYS Date: 9-22-05
 Address: Kagman Phone No.: _____
 Service Location: DYS-LIDU

TYPE OF SERVICE

- | | | |
|--|--|--|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Inspection/Follow-up | <input type="checkbox"/> IPM (Integrated Pest Management) Method |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap/Time Mist | <input type="checkbox"/> Termite Bait Station |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Trenching/Slab Injection/Rodding |
| <input checked="" type="checkbox"/> Residual Spray | <input type="checkbox"/> Lawn Treatment (Residual Spray) | <input type="checkbox"/> Soil Treatment |
| <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Turf & Ornamental | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Ants | <input checked="" type="checkbox"/> Flies/Gnats | <input checked="" type="checkbox"/> Carpenter Ants |
| <input checked="" type="checkbox"/> Roaches | <input checked="" type="checkbox"/> Ticks | <input type="checkbox"/> Termites |
| <input type="checkbox"/> Rodents/Shrews | <input checked="" type="checkbox"/> Fleas | <input type="checkbox"/> Others: _____ |

TECHNICIANS NOTE:

COMMENTS:

Insecticide liquid to the interior and exterior facilities of the building to control the insects.
 Refilled rodent station with rodenticide to control also the rats.

RECOMMENDATIONS:

MATERIALS USED

AMOUNT USED

Tempo	16 ml.
Fastrac	2 pcs.

Customer's Name: Mr. Antonio
 Signature: _____

Technicians(s): Roger de Gugman
 Time In: 9:40 Time Out: 16:40

"We're ADVANCE!"